



Application [Date:					

APPLICATION CHECKLIST

All Documents are required for an application to be considered complete.

1. Income Tax Documentation

- Copies of 3 most recent years signed tax documents, including W-2 forms (1040, 1040A, 1040EZ, 1098, 1099, all schedules)
- o In the event a tax document is missing in part or in whole, or if the applicant did not file taxes, a transcript or verification of non-filing may be requested from the IRS (Form 4506-T is available upon request from the IRS at www.irs.gov)
- o If self-employed, include year-to-date Profit and Loss statement and last four (4) quarterly tax payment documents

2. Financial Institution Account Information

- o Copies of last three (3) months of information (All checking, savings, IRA, etc.)
- o Copies of interest/dividend income of over \$100.00/annually
- o Copies of any stock statements for previous three months

3. Evidence of Income

Last 30 days of consecutive Applicant(s) and Person(s) within the Household who earn income:

- o Payroll stubs
- o Alimony
- o Child support
- Social Security (annual benefit statement)
- o Pension copy of latest statement with balance of retirement account even if you are not currently collecting a pension)
- Disability (may be required to submit evidence of disability)
- Unemployment
- Government assistance, including Section 8 homeownership vouchers (if applicable)
- o Other
- Life insurance policies (identify policy and type)

4. Verifications - See attached

- Verification of employment
- Verification of income from business (if applicable)
- Verification of full-time student (if applicable: required to be completed by the school if a member of the household is over 18 years of age and enrolled as having a full-time student status)

5. Liabilities

Provide copies of two (2) most recent statements even if the account carries a zero balance:

- Auto loans/leases
- Credit card(s)
- Personal loan(s)
- Department store(s)
- Other (describe):

6. Homebuyer Education/Mortgage Pre-Approval

- o Copy of certification from certified homebuyer course
- o Pre-approval/pre-qualification from lending institution

7. Copy of Proof of Identification For All Applicants and Co-Applicants:

- o Copy of driver's license
- Social Security card
- o Birth certificate and immigrant status





8. Signed Documents

- o Completed application
- o Lead-paint affidavit (available upon request and required upon execution of offer)
- o <u>COPY</u> of required documents (we do not make and/or provide copies)

You may provide any additional information if you feel it is applicable to you and your household.

If your household income changes at any time during the application process or during the eligibility time period, you must notify the Community Development Department. Please also note that the homebuyer assistance process can take up to three months. In addition, we cannot provide assistance to projects that the underwriting review show require subsidies that exceed our funding cap.





BORROWER INFORMATION			
	Borrower		Co-Borrower
Name			
Social Security Number			
Home Phone (incl. area code)			
Business Phone (incl. area code)			
Date of Birth			
*Marital Status (married, single, divorced, widowed)			
Number of dependents			
Present address (street, city, state, zip code)			
Number of years at present address			
. HOUSEHOLD INFORMATIONNames and ages of NAME	DATE OF BIRTH	l (including borrow	er and co-borrower, if any) OCCUPATION (t)
NAIVIE	DATE OF BIRTH		OCCOPATION (t)





Name household members who receive a	alimony		
Name household members who receive o	child support		
Name household member currently servi	ng in the Military		
III. EMPLOYMENT INFORMATION (if mor Please use the back of this page for addi	re than 2 members of the household are entional jobs, part or full time, if any.	mployed, please provide the informat	ion on back)
	Borrower	Co-Borrower	
Name and Address of Employer If self employed, please state Self Employed *			
Dates (from-to)			
Position/Title/Type of Business			
Monthly income			
Business Phone (incl. area code)			
	City		ZIP
	Account Type		
Bank Name			
Name on Acct.:			
Address	City	State	ZIP
Account No	Account Type		
Retirement Account			
Name on Acct.:			
Address	City	State	ZIP
Account No	Balance		
Can you withdraw funding from your reti	rement account?		





Name on Policy			
Term or Whole Life	 e?		
Insurance Compan			
Address		City	State
Name on Policy			
Term or Whole Life	e?		
Insurance Compan	ıy		
Address		City	State
How many autom	obiles do you own?		
Year	Model		
Year	Model		
Are any of the aut	omobiles used for a business?		

V. DECLARATIONS

If you answer "yes" to any questions 1 through 12, please use back side of this page for explanation.

- 1. Have you owned a home in the past 3 years?
- 2. Are there any outstanding judgments against you?
- 3. Have you been declared bankrupt within the past 7 years?
- 4. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?
- 5. Are you a party to a lawsuit?
- 5. Have you directly or indirectly been obligated on any loan that resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?
- 6. Are you presently delinquent or in default of any Federal debt or any other loan, mortgage financial obligation, bond, or loan guarantee? If 'yes," give details as described in preceding question.
- 7. Are you obligated to pay alimony, child support, or separate maintenance?
- 8. Is any part of the downpayment borrowed?
- 9. Are you a co-maker or endorser on a note?
- 10. Are you a U.S. citizen?
- 11. Are you a permanent resident alien?
- 12. Do you intend to occupy the property as your primary residence?

Yes	No	Yes	No

Borrower

Co-Borrower





__Date____

I/we fully understand that it is a Federal Crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under provisions of Title 18, United States Code, Section 1001, et seq. Borrower's signature Co-Borrower's signature____ __Date_____ VI. INFORMATION FOR GOVERNMENT MONITORING PURPOSES The following information is requested by the Federal government for certain types of loans related to a dwelling, in order to monitor the Lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this Lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for.) **National Origin** Borrower Co-Borrower I do not wish to furnish this information White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/ Other Pacific islander American Indian /Alaskan Native & White Asian & White Black/African American & White American Indian/Alaskan Native & Black/ African American Other Multi Racial Hispanic Please indicate (circle) if you are male or female M F M F I/we fully understand that it is a Federal Crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under provisions of Title 18, United States Code, Section 1001, et seq. Borrower's signature

Co-Borrower's signature______





VII. ACKNOWLEDGEMENT AND AGREEMENT

The undersigned specifically acknowledge(s) and agree(s) that (1) the loan requested by this application will be secured by a second mortgage or deed of trust on the property described herein; (2) the property will not be used for any illegal or prohibited purpose or use; (3) all statements made in this application are made for the purpose of obtaining the loan indicated herein; (4) verification or re-verification of any information contained in the application may be made at any time by the Lender, its agents, successors and assigns, either directly or though a credit reporting agency, from any source named in this application, and the original copy of this application will be retained by the Lender, even if the loan is not approved; (5) the Lender, its agents, successors and assigns will rely on the information contained in the application and I/we have a continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I/we have represented herein should change prior to closing; (6) in the event my/our payments on the loan indicated in this application become delinquent, the Lender, its agents, successors and assigns, may, in addition to all their other rights and remedies, report my/our name(s) and account information to a credit reporting agency; (7) ownership of the loan may be transferred to successor assign of the Lender without notice to me and/or the administration of the loan account may be transferred to an agent, successor or assign of the Lender with prior notice to me; (8)the Lender, its agents, successors and assigns make no representations or warranties, express or implied, to the Borrower(s) regarding the proper, the condition of the property, or the value of the property; (9) the property will be the primary residence of the signatories for the term of the loan requested by this application.

Certification: I/We certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application, may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. And liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application.

Borrower's Signature	Date	Co-Borrower's Signature	Date





VERIFICATION OF EMPLOYMENT

Employed Since: ______

AUTHORIZAION: Federal Regulations require us to verify Business income of all members of the household applying for participation in the HOME Program which we operate and to reexamine this income per joidically. We ask your cooperation in supplying this information. This information will be used only to determine the eligibility status and level of benefit of the household. Your prompt return of the requested information will be appreciated. A self-addressed return envelope is enclosed. Your prompt return of the requested information will be appreciated. A self-addressed return envelope is enclosed. **Power of No. Weeksworked per year Overtime pay rate: \$/Hour	WestMetro HOME Consortium	Occupation:
verify Business Income of all members of the household applying for participation in the HOME Program which we operate and to reexamine this income periodically. We ask your cooperation in supplying this information. This information will be used only to determine the eligibility status and level of benefit of the household. Your prompt return of the requested information will be appreciated. A self-addressed return envelope is enclosed. Your prompt return of the requested information will be appreciated. A self-addressed return envelope is enclosed. An everage hours/week at base pay rate: Hours No. Week's or No. Weeks worked per year Overtime pay rate: \$ /Hour Expected weekly average number of hours overtime to be worked during next 12 months Any other compensation not included above (specify for commissions, bonuses, tips, etc.): For: \$ per Total overtime earnings for past 12 mos. \$ Does the employee have access to a retirement account? Yes No If Yes, what amount can they get access to: \$ Signature of or Authorized Representative [Signature of Applicant) Date: Date: Date: Date: Title: Date: Title: Date: Title: Date:	Town of Framingham Homebuyer Assistance Program	
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RELEASE: I hereby authorize the release of the requested information. Signature of or Authorized Representative		If Yes, what amount can they get access to:
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Date: Or a copy of the executed "HOME Program Eligibility Release Form," which authorizes the release of the		
Or a copy of the executed "HOME Program Eligibility Release Form," which authorizes the release of the	(Signature of Applicant)	
Or a copy of the executed "HOME Program Eligibility Release Form," which authorizes the release of the	Date:	Date:
	Release Form," which authorizes the release of the	





The Town of Framingham reserves the right to modify the Homebuyer Assistance Program in order to make improvements or to respond to changes in federal regulations.

Return this form with your completed application

PRIMARY RESIDENCE

The property owner must use property purchased with the assistance of the First Time Homebuyer Assistance Program as his or her Primary Residence for the entire length of the outstanding loan. The Framingham Community Development Department will enforce this requirement through annual monitoring of properties purchased through the First Time Homebuyer Assistance Program.

NON-DISPLACEMENT POLICY

The Framingham Community Development Department will not provide HOME funds for First Time Homebuyer Assistance towards the purchase of any property if any existing tenant(s) will be displaced upon change of ownership. This policy expressly applies to single-family homes and condominiums that are occupied by tenants at the time of purchase, as well as to multi-unit structures. There must be an empty unit at purchase and sale to move forward.

LEAD PAINT POLICY

The Framingham Community Development Department <u>will not</u> provide HOME funds for First Time Homebuyer Assistance towards the purchase of any property if the property is not in compliance with State and Federal Lead Paint Regulations. Lead grants are available to DPA homebuyers.

HQS STANDARDS

The Framingham Community Development Department <u>will not</u> provide HOME funds for First Time Homebuyer Assistance towards the purchase of any property if the property is not in compliance with Federal Housing Quality Standards.

TENANT INCOMES AND RENT LIMITATIONS

If assistance is provided for the purchase of two, three or four-family buildings with rental units, the property owner must agree to abide by HOME regulations concerning rents, tenant incomes and tenant protections, as described in 24CFR92.252 and 24CFR92.253. The City will monitor all rental leases annually.

SUBORDINATION POLICY

In the event of a re-financing of your property the Town will subordinate the mortgage for a lower interest rate re-finance only. If you choose to take equity, your loan will have to be paid in full.

I/We understand and agree to abide by all rules and regulations of the HOME Program as a condition to participate in and receive funding from the Framingham First Time Homebuyer Assistance Program.

Applicant Signature	Date
Co-Applicant Signature	Date





Affadavit of Understanding

I/We have read the First Time Homebuyer Assistance Program Guidelines issued by the Town of Framingham.

I/We understand and agree to abide by the terms and conditions of the Program as set forth therein.

borrower.				
Signature		Date		
Name (please print) _				
Address				
		City	State	Zip code
Telephone Numbers _				
	(home)	(cell)	(work)	
Co-Borrower:				
Signature		Date		
Name (please print) _				
Address				
		City	State	Zip code
Telephone Numbers _				
	(home)	(cell)	(work)	

Return this form with your completed application